

State Fire Assistance Grant Application

FOR OFFICIAL USE ONLY	
State Submitting Project:	
State Priority Number:	
Dollar Amount Requested:	
Matching Share:	

*For guidance on filling in each box in this application, refer to the *IDL Pre-Proposal Guidelines*

Applicant Information	
1	Applicant:
	Contact Person:
	Address:
	City/Zip Code:
	Phone (Work/Cell):
	Email:
	Fax:
	Federal Tax ID\DUNS #:

Project Information		
2	Name of Project:	
	Community Name:	
	County(ies):	
	Congressional District:	
	Latitude:	Longitude:
	Which grant program is pre-proposal for? WFM <input type="checkbox"/> and/or CPP <input type="checkbox"/>	
	Will the project be on non-federal land and align with and be adjacent to a Forest Service and/or HFT project? Yes <input type="checkbox"/> No <input type="checkbox"/>	

** Attach a map of the project area, as per the *IDL Request for Project Pre-Proposal Guidelines*, to this form.

Total Project Expense					
	Budget Detail (Provide additional information in Block 4)	Grant Share (\$ Amount Requested)	Match		TOTAL
			Dollars	In-Kind	
3	Personnel / Labor:				
	Fringe Benefits:				
	Travel:				
	Equipment:				
	Supplies:				
	Contractual:				
	Construction:				
	Other:				
	Indirect Costs:				
	TOTAL:				

4	Budget Narrative		
5	The Project		
6	Relation to Forest Action Plan/CWPP		

	Proposed Activities	
7		

	Landscape	
8		

9	Project Collaboration		

10	Project Timeline		

11	Project Sustainability		

ALL INFORMATION MUST FIT INTO THE BOXES PROVIDED. ATTACHMENTS AND/OR MODIFICATIONS WILL NOT BE CONSIDERED BY THE COMMITTEE.